2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23120

Entity Name: LIVE OAK MANAGEMENT, INC.

FILED Jan 16, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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SR 129 AND I-10 LIVE OAK, FL 32060

Current Mailing Address: New Mailing Address:

P. O. BOX 39 P. O. BOX 39

LIVE OAK, FL 32060 LIVE OAK, FL 32064

FEI Number: 58-1417925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HINTON, S L
204 N.E. HAINES STREET
LIVE OAK, FL 32060 US
HINTON, S L
204 N.E. HAINES STREET
LIVE OAK, FL 32064 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: S. L. HINTON 01/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 HINTON, SL
 Name:
 HINTON, SL

 Address:
 204 NE HAINES ST
 Address:
 204 NE HAINES ST

 City-St-Zip:
 LIVE OAK, FL
 City-St-Zip:
 LIVE OAK, FL
 32064

 Name:
 HINTON, JUDITH H
 Name:
 HINTON, JUDITH H

 Address:
 204 NE HAINES ST
 Address:
 204 NE HAINES ST

 City-St-Zip:
 LIVE OAK, FL
 32064

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 HINTON, III, JAMES T
 Name:
 HINTON, III, JAMES T

 Address:
 204 NE HAINES ST.
 Address:
 204 NE HAINES ST.

 City-St-Zip:
 LIVE OAK, FL 32060 US
 City-St-Zip:
 LIVE OAK, FL 32064 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. L. HINTON P 01/16/2008